P. 002/009

State of Wisconsin Department of Natural Resources Private Water Systems Section - DG/2 dnr.wi.cov

High Capacity, School or Wastewater Treatment Plant Well Approval Application

Form 3300-256 (R 7/05)

JUN 6 - 2014

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Notice: Prior department approval is required for the construction, reconstruction or operation of a high capacity well, or system of high capacity wells, a school well or a wastewater treatment plant well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code: Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR 811, Wis. Adm. Code. See NR 811.01, Wis. Adm. Code for applicability requirements.

Applicant Information			(e)	, , , , , , , , , , , , , , , , , , ,		w er	
Application Prepared By (Name and Title	9)	Company				111.19.111	
Scott Kok		Lovela	ice W	ell Drilling	In	c .	
Street Address		City		J. Dini	State	ZIP Code	-
9914 County M		Avgu	10		rw	53504	
Telephone Number	Fax Number		E-Mail Ad	dress	002	100001	_
608-465-1010	608-465-1114		mel	issalpce	+ds	·net	
Property Ownership Information			***				_
Property owner, if different than applicant	(Name of Person and Title)	Сотралу				Mel	
Lowell Hoffmann							
Street Address		City			State	ZIP Code	2
N9839 Inglehart Rd	l.	Camb	ria		INI	53923	
telephone Number	Fax Number	-	-Mail Ado	dress	14.		
920-394-3879						ā.	
Well Operator Information		. '			-		_
Well operator if different than owner (Nam	e of Person and Title)	Company				W 2	_
Same							
Street Address		City	**		State	ZIP Code	-
Telephone Number	Fax Number	E	-Mall Add	ress	-	•	-
Property Information					/		
Enter the High Capacity Well File Number be	alow if the property is already a	high capacity p	roperty. If	the property is not	designa	ted as a high capacity	_
property at the time of application, enter "NO or use the compact disk of departmental well	I data that is issued to drillers ar	nd numo installe	are On the	as visit treamon	a "Ella la	catton to tad print in	,
Location Section. File number format is as t	follows: (1 or 2 digits for county)	• (1 digit for we	II dassific	ation) - (1 to 4 digi	s for as:	signed property no.),	_
County	Town			High Capacity W	ell File N	lo.	
Green Lake	Kingston						
Submittal Purpose	· V	W.					
Check all that apply:			W-95				_
Install one or more new wells with a							
Install one or more new wells with a				capacity proper	ty.	20	
Replace one or more wells with a ca							
Replace one or more wells with a ca				apacity property.			
Reconstruct one or more wells with							
Reconstruct one or more wells with	a capacity less than 70 gallo	ons per minute	on a hig	h capacity prope	erty.		100
Increase pumping rate in one or more	re wells to a rate greater tha	n previously a	pproved.				
Request continued operation of high	capacity wells after a chang	ge in ownersh	lp. (Noa	pplication fee re	quired.)	
Renew a previous approval that has		G A 89					
Well (or wells) will serve a school or	wastewater treatment plant.	. Šee definitio	ns on pa	ge 5.			
Other, explain			15 20	VIII.			_
	0 -3/00-						-

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5	ite Status Information
2	betermine the site status using the internet or the compact disk of departmental well data that is issued to drillers and pump installers and the information supplied by the property owner. Internet address is dnr.wi.gov/org/water/dwg/dws.htm . Enter YES or NO for each fithe following guestions.
Y [ES NO Has the property boundary changed since the most recent high capacity well approval was issued? If the property is not yet a high capacity property, check NO.
	Has there been a change in well ownership since the last approval was written?
	If YES, name of current owner. Date of purchase:
_	
L	Has there been a change in well operator since the last approval was written? If YES, name of current operator: Date of change:
	Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc.)? If YES, Include a schematic drawing showing backflow protection.
	Is a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section line, also check the adjacent section or sections. If YES, ilst the landfill site ID Number: OR Landfill location: (Township/Range/Section)
	Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed: Open Closed
	Is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program:
	Is a proposed well on a property that is listed on the department's registry of closed remediation sites for a groundwater use restriction? See compact disk or internet at maps.dnr.state.wi.us/imf/dnrimf.jsp?site=brrts. If YES, list the BRRTS Number here:
	is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water system" in the definitions section on page 5.
	Is a proposed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office.
	Has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well approval was issued?
	Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO.
	S a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use?
	the well discharge directly to a storage pond?
	Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use?
	Is a proposed well within 1,200 feet of a quarry?
	Is a proposed well located in a floodplain or floodway?
	Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code?
	Will the well be used as a source of bottled water?
	Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?
	Its the property served by a community water system?

Existing Well Information				
Enter the following information or	n all existing wells on the	property, if more than fo	ur wells, submit additiona	I sheets:
Well Name Assigned by Well Owner (North Well, etc.):	Farm	House		
Well Number Assigned by Owner (001, 002, etc.):				
WI Unique Well Number or NA if no number:		DS 453		
Permanent DNR High Capacity Well Number or N/A if none:				
Public Water System ID Number, if Public (if not public, NONE):	NONE	NONE		
Potable or Non-Potable Use:	Potable	Potable		
Type of Well (Irrigation, Industrial, Residential, etc.):	Farm	Residential		
Requested Average Water Usage per Day in Gallons:		de la constanta		
Requested Maximum Water Usage per Day in Gallons:				
Seasonal? (April to October, Year Around, etc.):	Year Around	Year Around		
Approved Pumping Capacity if Previously Approved (gpm):			***************************************	
Current Pump Type & Capacity (gpm)	Subm. Yahp 10 gpm	Subm. 1/2 hp 10gpm		
Proposed Pump Type & Capacity If Change Requested (gpm):				
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	Over the Top	Pitless		
Discharge Location (Building Pressure Tank, Pond, etc.):	Pressure Tank	Pressure Tank		
Height of Well Casing Above Ground in Inches:	12"	12"		
Potential Contaminant Sources and Distance:		101		
Well Loc: Quarter Quarter Section	NW 1/4 of SE 1/4	NW 1/4 of SE 1/4	1/4 of 1/4	414.55 414
or Government Lot Number	17 W 11 10 DD 11	1 4 37 17 4 51 5 5 1).	7 174 01 174	1/4 of 1/4
Section or French Long Lot No.	27	27		
Township:	T 14 N	T 14 N	T N	
Range (Select E or W):				T N
	N 113 0 29 955	N43 · 39.896	/R LELW	R DE W
Longitude (Degrees and Minutes)	089 0 10 398	089. 10.356	1 0	
GPS Map Datum (WGS84,	<u> </u>	<u> </u>		0
WTM91, etc.) Include as much of the following inform well construction record is attached, ap	lation as practical for wells to	hat do not have well constru	Lion records attached to the	application, however if the
Date of Construction:	unknown	5.14.91		
Drilled by (Name of Drilling Firm):	unknown		ver Central Well Drilling	
Drilling Method(s) (Rotary, Percussion, Etc.)	00110710071	Rotary	Lengral Well Dirlling	
Well Depth in Feet:	?	119		
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	inches, feet	8.75 inches, 83 feet	inches, feet	inches, feet
ower Drillhole Diameter in Inches and Depth in Feet:	inches, feet	6 inches, 119 feet		
Well Casing Diameter in Inches and Depth in Feet:	H inches, ? feet	6 inches, 83 feet	inches, feet	inches, feet
Well Casing Material and Wall Thickness:	Steel	Steel	186(inches, feet
Annular Space Material Between Casing and Drillhole Wall:		cement		
s There a Well Screen (Y or N) If so, Screen Material?;				

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		, viii, 0000, 520 (i, 1100)	9 0
Proposed Well Information			
Enter the following information on	all proposed wells on the property, if more than two we	ells or alternate construction, submit additional she	ets:
Well Name Assigned by Well Owne (North Well, etc.):			
Well Number Assigned by Owner (001, 002, etc.):			
Well Loc: Quarter Quarter Section of French Long Lot Number	NW 1/4 of SE 1/4 of Section 27	1/4 of 1/4 of Section	
or Government Lot Number		114 of Getabri	
Township & Range (Select E or V	M)T 14 N.R 1 NE 🗆	/T N.R DE	П.
Latitude (Degrees and Minutes)	N42 39.485		<u>'</u>
Longitude (Degrees and Minutes)		a	
GPS Map Datum (WGS84, WTM91, etc.)			
Type of Well (Irrigation, Industrial, Residential, etc.):	Typa: Trrigation Potable	Type: Potable	abie
Drilling Method(s) (Rotary, Percussion, Etc.):	Rotarty		
Material and Depth Interval:	Depths that Are Expected During Orilling:		
Material and Depth Interval:	Clay + Gravel from 0' to 21	from 0' to	
	Sandrock from 21 to 450	from ' to	
Material and Depth Interval:	from 'to '	from ' to	
Material and Dapth Interval:	from ' to '	from 'to	
Material and Depth Interval: Drilhole Diameter and Anticipated De	from 'to '	from 'to	
Diameter and Depth Interval:			
Diameter and Depth Interval:		from to	
Diameter and Depth Interval:		from 'to	
*	from ' to ' and Wall Thickness at Anticipated Depth Intervals:	from 'to	
Diameter and Wall Thickness at Depth Interval: Diameter and Wall Thickness	14 "diam/ .375" thick 0' to 60	"diam/ "thick 0" to	1
at Depth Interval; Permanent Casing or Liner Material , I	"diam/ "thick 'to '	"diam/ "thick to	
Casing Joints (Welded, T end C, etc.)	Welled		
Material and Weight at Depth Interval:	I bullook Older		
Material and Weight	/ lbs/foot 0 to '	/ Iba/foot 0 to	
at Depth Interval: Screen Material, Stot Size in Inches	/ ibs/foot ' to '	/ / lbs/foot 'to	1
and Depth Interval or N/A if none: Casing to Screen Joint (Welded, T.		/ "/ ' to	٠,
and C, K Packer, etc.)			
Annular Space Material Including Filter	Pack Material, If Used:		
Material and Depth Interval:	/ 0' to '		
Material and Depth Interval: Proposed Average Water Usage Per Day in Gallons:	/ ' to'	1 to	
Proposed Maximum Water Usage Per Day in Gallons:	Λ		_
Seasonal? (April to October, Year Around, etc.);	Season		
Proposed Pump Type & Capacity (gpm):	Turbine or Submersible 1000 gpm		
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit);	Over the Top		_
Discharge Location (Building Pressure Tank, Pond, etc.);	Irrigation Center Point		
Distance and Direction to Nearest Public Utility Well & Well Name:	2 miles Dalton OTM		_
Distance to Other Potential	J. J		
Contaminant Sources: Distance to Other Potential Contaminant Sources:			
eave Blank, for Department use only			_

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Required Attachments

- Attach one of the maps described in A, or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
- 2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells; property boundary, wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow, if no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
- 3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
- 4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
- 5. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic.
- If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
- If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and Incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR B12, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

Name - Print Scott	KoK		Check Box Owner	Agent of the Owner
Signature Settle		Company CONTINE	WFO	Date 5-29-14
Application submittal. Mail complet Section - DG/2, PO Box 7921, Mad	ed application and ison WI 53707-79	payment with all required atta 21.	chments to DNR, I	Private Water Systems
Definitions from Wisconsin Admi	nistrative Codes		· · · · · · · · · · · · · · · · · · ·	
"High gansaity wall" magas a wall a				 On the first of the property of the contract of t

"High capacity well" means a well constructed on a high capacity property. [NR 812.07(51)]

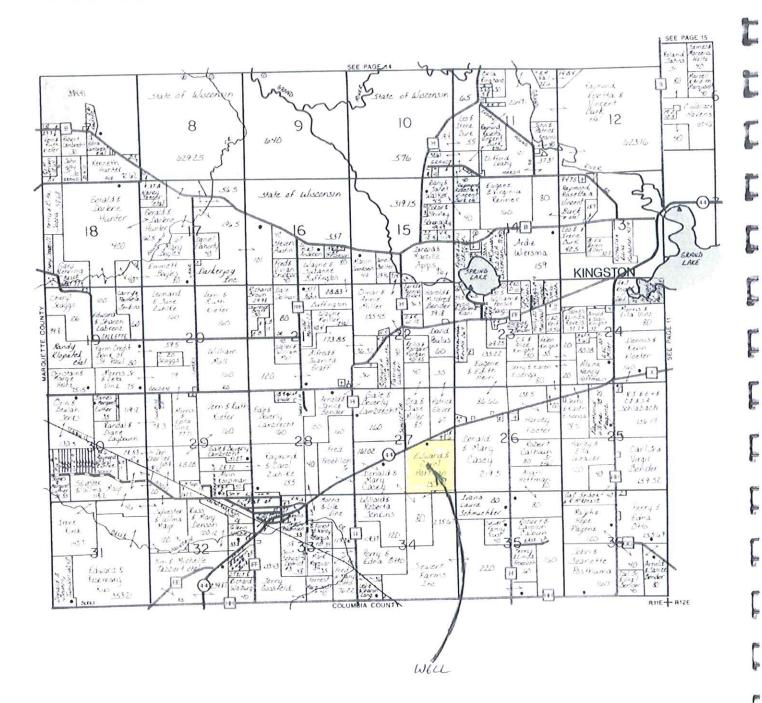
"High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate, [NR 812.07(53)]

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR 812.07(80)]

"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]



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